



## PART 8 - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
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 P.O. Box 1450  
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 or **Fax** (512) 273-2885

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**Rachael M. Harris** (Depositor's name)  
*Rachael M. Harris* (Signature)  
 March 14, 2006 (Date)

03/15/2006 TBESHAH2 00000047 10672582

01 FC:1501 1400.00 OP  
 02 FC:1504 300.00 OP  
 03 FC:8001 15.00 OP

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10672,582	09/25/2003	Frank Daigle	15836.9	8646

**TITLE OF INVENTION:** METHOD FOR RECURSIVE ECHO PROCESSING IN TIME-OF-FLIGHT OR LEVEL MEASUREMENT SYSTEMS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	04/13/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
PIHULIC, DANIEL T	3662	367-099000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

**PLEASE NOTE:** Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Siemens Milltronics Process Instruments, Inc.

(B) RESIDENCE: (CITY AND STATE OR COUNTRY)

Peterborough, Canada

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee  
☒ Publication Fee (No small entity discount permitted)  
☒ Advance Order - # of Copies 5

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.  
☒ Payment by credit card. Form PTO-2038 is attached.  
☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 23-3178 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

*R. Burns Israelson*

Date

March 14, 2006

Typed or printed name

R. Burns Israelson

Registration No.

42,685

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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60 East South Temple  
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Phone: (801) 533-9800  
Fax: (801) 328-1707

## FAX TRANSMISSION COVER SHEET

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**Date:** March 14, 2006  
**To:** Issue Fee  
United States Patent & Trademark Office  
**Fax:** (571) 273-2885  
**Phone:**  
**From:** R. Burns Israelsen  
**Re:** Serial No. 10/672,582  
Filing Date: September 25, 2003  
Docket No: 15636.9

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YOU SHOULD RECEIVE 5 PAGE(S), INCLUDING THIS COVER SHEET.  
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**Attached:**  
Please see attached.

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CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)		Docket No.	
Applicant(s): Frank Daigle		15636.9	
Application No. 10/672,582	Filing Date 03/14/2006	Examiner Pihulic, Daniel T.	Group Art Unit 3662
Invention: METHOD FOR RECURSIVE ECHO PROCESSING IN TIME-OF-FLIGHT OR LEVEL MEASUREMENT SYSTEMS			
<p>I hereby certify that this _____ <u>Issue Fee</u> _____ (Identify type of correspondence)</p> <p>is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>(571) 273-2885</u>)</p> <p>on <u>March 14, 2006</u> (Date)</p> <p><u>Rachael M. Harris</u> (Typed or Printed Name of Person Signing Certificate)</p> <p><u>Rachael Harris</u> (Signature)</p>			
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<b>TRANSMITTAL OF PAYMENT OF ISSUE FEE (Large Entity)</b> (37 C.F.R. 1.311)				Docket No. 15636.9	
Applicant(s): Frank Daigle					
Application No. 10/672,582	Filing Date 09/25/2003	Examiner Pihulic, Daniel T	Customer No. 022913	Group Art Unit 3662	Confirmation No. 8646
Invention: <b>METHOD FOR RECURSIVE ECHO PROCESSING IN TIME-OF-FLIGHT OR LEVEL MEASUREMENT SYSTEMS</b>					

**Mail Stop Issue Fee**  
**COMMISSIONER FOR PATENTS**  
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Alexandria, VA 22313-1450

Transmitted herewith are the following for the above-identified application.

- ☒ Issue Fee Transmittal Form PTOL-85
- ☒ Utility Fee: \$ 1400.00      ☐ Design Fee: \_\_\_\_\_      ☐ Plant Fee: \_\_\_\_\_
- ☒ Publication Fee: \$ 300.00
- ☐ A check in the amount of \_\_\_\_\_ is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 23-3178 as described below.
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- ☒ Credit any overpayment.
- ☒ Charge any additional fee required.
- ☒ Payment by credit card. Form PTO-2038 is attached.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

*R. Burns Israelsen*  
\_\_\_\_\_  
Signature

Dated: March 14, 2006

**R. Burns Israelsen**  
**Attorney for Applicant**  
**Registration No. 42,685**

CC:

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